



City of Morgan Hill Centennial Recreation Center Authorization for Bank Draft

Member Name (Please Print): _____

E-mail Address: _____

Member # (if applicable): ____ -- ____

Account Information

A voided check is needed to complete bank draft transaction. I understand that if my bank account has an NSF (sufficient funds not available), my account will be drafted at the next available draft.

Name on Account (Please Print)

Date

Account Holder's Signature

Beginning on the ☐ 1st ☐ 15th

of _____ the following charges will be continuously drafted:
(Enter Month)

I authorize the City of Morgan Hill to deduct a monthly charge from my financial institution in the amount listed above. I agree to give 15 working days notice prior to my draft date, in writing, to the Centennial Recreation Center to cancel or make any changes to my credit card/bank draft. I understand that if my bank draft is rejected, a \$21.00 service charge will be applied to my account. I also understand that if I do not cancel my membership within the 15 working days prior to my draft, my account will be drafted for the full amount, and there will be no refund.

Member Signature: _____ **Date:** _____

Staff Signature: _____ ☐ New Member ☐ Change